## U.S. GOVERNMENT LEASE FOR REAL PROPERTY (Short Form)

Attachment#_3	
57-4209-0-02	_

PART 1 - SOLICITATION/DESCRIPTION OF REQUIREMENTS (To be completed by Government)

## A. REQUIREMENTS

The Government of the United States of America is seeking to lease approximately <u>474</u> rentable square feet of <u>office</u> space located in <u>Tallahassee, Florida</u> for occupancy not later than <u>October 1, 2000</u> (date) for a term of <u>5 years with 5 year renewal option</u>. Rentable space must yield <u>N/A</u> BOMA Usable square feet for use by Tenant for personnel, furnishing, and equipment.

INITIAL OFFERS ARE DUE ON OR BEFORE CLOSE OF BUSINESS N/A.

## **B. STANDARD CONDITIONS AND REQUIREMENTS**

The following standard conditions and requirements shall apply to any premises offered for lease to the UNITED STATES OF AMERICA (hereinafter called the GOVERNMENT):

Space offered must be in a quality building of sound and substantial construction, either a new, modern building or one that has undergone restoration or rehabilitation for the intended use.

The Lessor shall provide a valid Occupancy Permit for the Intended use of the Government and shall maintain and operate the building in conformance with all applicable current (as of the date of this solicitation) codes and ordinances. Below-grade space to be occupied by the Government and all areas in a building referred to as "hazardous areas" in National Fire Protection Association Standard 101, or any successor standard thereto, must be protected by an automatic sprinkler system or an equivalent level of safety. A minimum of two separate stairways shall be provided for each floor of Government occupancy. Scissor stairs will be counted as one stairway. If offered space is 3 or more stories above grade, additional egress and fire alarm requirements may apply.

The Building and the leased space shall be accessible to workers with disabilities in accordance with the Americans With Disabilities Act Accessibility Guidelines (36 CFR Part 1191, App. A) and the Uniform Federal Accessibility Standards (41 CFR 101-19.6, App. A). Where standards conflict, the more stringent shall apply.

The leased space shall be free of all asbestos containing materials, except undamaged asbestos flooring in the space or undamaged boiler or pipe insulation outside the space, in which case an asbestos management program conforming to Environmental Protection Agency guidance shall be implemented. The space shall be free of other hazardous materials according to applicable Federal, State, and local environmental regulations.

Services, utilities, and maintenance will be provided daily, extending from \_\_\_7:00\_\_ a.m. to \_\_\_5:00\_\_ p.m. except Saturday, Sunday, and Federal holidays. The Government shall have access to the leased space at all times, including the use of electrical services, toilets, lights, elevators, and Government office machines without additional payment.

The Lessor shall complete any necessary alterations within \_\_N/A\_ days after receipt of approved layout drawings.

SERVICES AND UTILITIES (To be provided by Lessor as part of rent)					
X HEAT	X TRASH REMOVAL	" ELEVATOR SERVICE	X INITIAL & REPLACEMENT "O"	THER	
X ELECTRICITY	X CHILLED DRINKING WATER	" WINDOW WASHING	LAMPS, TUBES & BALLASTS (S	pecify below)	
X POWER (Special Equip.)	X AIR CONDITIONING	Frequency	PAINTING FREQUENCY		
X WATER (Hot & Cold)	X TOILET SUPPLIES	" CARPET CLEANING	Space	•	
- SNOW REMOVAL	X JANITORIAL SERV. & SUPP.	Frequency	Public Areas		

3. OTHER REQUIREMENTS

General Clauses, GSA Forms 3517 and 3517A, are incorporated into lease.

Representations and Certifications, GSA Form 3518A are incorporated into lease.

Attachment A is incorporated into lease.

Lease is for 5 years from October 1, 2000 through September 30, 2005 with 5 year renewal option.

NOTE: All offers are subject to the terms and conditions outlined above, and elsewhere in this solicitation, including the Government's General Clauses and Representations and Certifications.

## 4. BASIS OF AWARD

X THE ACCEPTABLE OFFER WITH THE LOWEST PRICE PER SQUARE FOOT, ACCORDING TO THE ANS/BOMA 265.1-1996 DEFINITION FOR BOMA USABLE OFFICE AREA. WHICH MEANS "THE AREA WHERE A TENANT NORMALLY HOUSES PERSONNEL AND/OR FURNITURE, FOR WHICH A MEASUREMENT IS TO BE COMPUTED."

OFFER MOST ADVANTAGEOUS TO THE GOVERNMENT, WITH THE FOLLOWING EVALUATION FACTORS BEING "SIGNIFICANTLY MORE IMPORTANT THAN PRICE "APPROXIMATELY EQUAL TO PRICE "SIGNIFICANTLY LESS IMPORTANT THAN PRICE (Listed in descending order, unless stated otherwise):

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	PART II - OFF	ER (To be	completed by Offeror/C	Owner) P	age <u>2</u>	of_	.3
A. LOCA	TION AND DESCRIPTIO	N OF PREM	ISES OFFERED FOR L	EASE BY GOVE	RNMENT		
5. NAME AND ADDRESS OF BUILDING (In	iclude ZIP Code)			6. LOCATION(S)	IN BUILDING		· · · · ·
Leon County Agricultural Cer	nter		a. FLOOR(S)		. ROOM NUMB		
615 Paul Russell Road			1 Floor		NE NRCS	Office	•
Tallahassee, FL 32301				•			
Tananasses, IL 52501			c. RENTABLE SQ. FT.	d. TYPE			
			474 @ \$13.14/sf	" GENERA	L OFFICE	- ,	OTHER (Specify)
				" WAREHO	 DUSE		
		В. Т	FERM				
To have and to hold, for the term	commencing onOcto	ber 1, 200	and continuing the	oughSepten	nber 30, 2000	in	dusive. Th
Government may terminate this least	se at any time on or after_	October	1, 2000, by giving a	t least60_ d	ays notice in v	writing t	to the Lesso
No rental shall accrue after the effective	ctive date of termination.	Said notice s	shall be computed comm	nencing with the o	lay after <b>th</b> e d	ate of r	nailing.
		C. Ri	ENTAL		**	•	
Rent shall be payable in arrears an	d will be due on the first v	workday of e	each month. When the	date for commen	cement of the	lease	falls after the
15th day of the month, the initial ren period of less than a month shall be	ital payment shall be due d	on the first w	orkday of the second mo	onth following the	commencem	ent dat	le. Rent for a
7. AMOUNT OF ANNUAL RENT	9. MAKE CHECKS PAYA	BLE TO (Name	and address)		-		
\$6,228.36	Leon County Co						
8. RATE PER MONTH	Attn: Bill Bogan	<b>)</b>	,				
\$519.03	PO Box 726 Tallahassee, FL			•			
10a. NAME AND ADDRESS OF OWNER (Incl. necessary.)  Leon County Board of County				APPROV	ALTORNI ALTORNI AUTO FIO	FOR	M /
AND THE FOLLOWS MANAGED OF CHANCE	11. TYPE OF INTEREST IN	DISONERTY OF	DEDOON SIGNING	·			C AROLVE
10b. TELEPHONE NUMBER OF OWNER 850-922-4029	" OWNER	"	AUTHORIZED AGENT	ATTEST:	OTHER (Specify)		**************************************
12. NAME OF OWNER OR AUTHORIZED AGE	ENT		13. TITLE OF PERSON SIGN	mgDaye Lai	nġ		
Jane Sauls			Chairperson, Leo	Boand-PKCofin		_	<u> Fell</u>
14. SIGNATURE OF OWNER OR AUTHORIZE	DAGENT	15. DATE		15 ESALS.	distriction	id <b>a</b> r M	* A O CO
// , &	2: /	10/3	Iloo			)	40-4-1
Jane Coul	~	<u> </u>	·   ·	<u> </u>	histo	Alk	(Dufe)
<u>//                                   </u>			ompleted by Governm		mr v	-	4
Your offer is hereby accepted. The (b) Representations and Certification.	nis award consummates s, (c) the Government's Go	the lease v eneral Claus	which consists of the fo es, and (d) the following	changes or addit	nts: (a) this ions made or	GSA ( agreed	Florm Collection to by you:
			•				•
THIS DOCUMENT IS NOT BINDING AUTHORIZED CONTRACTING OFF		OF THE UN	ITED STATES OF AME	RICA UNLESS S	SIGNED BELO	OW BY	
17a. NAME OF CONTRACTING OFFICER (Type	· .	17b. SIGNAT	URE OF CONTRACTING OFFI	CER	17c. DATE		
Commence of the control of the contr	-··· <del>·•</del>			•			8
							5
					1		

			Attachment #_ 3	
			Page 3 of 3	
5.	52.20	04-3 - TAXPAYER IDENTIFICATION (JUN 1997)	••	
	(a)	Definitions.		
ar,	··· , ,	"Common parent," as used in this solicitation provision, group of corporations that files its Federal income tax member.	means that corporate entity that owns or contrels an affil returns on a consolidated basis, and of which the offeror	iated is a
		"Taxpayer Identification Number (TIN)," as used in this s be used by the offeror in reporting income tax and other r	solicitation provision, means the number required by the IF returns.	≀S to
	(b)	collection requirements of 31 U.S.C. //01(c) and 332	ragraphs (d) through (f) of this provision to comply with 5(d), reporting requirements of 26 U.S.C. 6041, 6041A, S. If the resulting contract is subject to the payment report (FAR) 4.904, the failure or refusal by the offeror to furnishents otherwise due under the contract.	anu
	(c)		d report on any delinquent amounts arising out of the offe  If the resulting contract is subject to the payment repo d hereunder may be matched with IRS records to verify	mr's
	(d)	Taxpayer Identification Number (TIN).		
		<ul> <li>TIN: 59-6000-708</li> <li>TIN has been applied for.</li> <li>TIN is not required because:</li> <li>Offeror is a nonresident alien, foreign corporation connected with the conduct of a trade or business business or a fiscal paying agent in the United Sta</li> <li>Offeror is an agency or instrumentality of a foreign Offeror is an agency or instrumentality of the Fede</li> </ul>	n, or foreign partnership that does not have income effecti s in the United States and does not have an office or plac ttes; government; tral government;	ively e of
		• •	ATTEST:	*
	(d)	Type of organization.	Dave Lang	
		* Sole proprietorship;	Clerk of Circuit Court	΄ ξ
		* Partnership; Not a corporate entity:  * Corporate entity (not tax-exempt):		45
		* Corporate entity (not tax-exempt); * Corporate entity (tax-exempt);	Leon County, Florida	ø
		<ul> <li>Government entity (Federal, State, or local);</li> </ul>	/ / Atthir	
		<ul> <li>Foreign government;</li> <li>International organization per 26 CFR 1.6049-4;</li> </ul>		
		* Other	Durk Mir CANG	
	(e)	Common Parent.	By: Clerk	
	``	<ul> <li>Offeror is not owned or controlled by a common pa</li> <li>Name and TIN of common parent:</li> </ul>	rent as defined in paragraph (a) of this provision	
		Name		
		TIN	APPROVED AS TO FORM- LEON COUNTY ATTORNEYS OP	2
6.	OFFE	ROR'S DUNS NUMBER (APR 1996)	Leon Compty Florida	
	Enter	number, if known:	By GEVRAY Out Rid	_
			·	
		Name and Address (Including 7IP Co	de) Telephone Number	_

OFFEROR OR	
AUTHORIZED	_
REPRESENTATIVE	=

6.

Jane Sauls, Chairperson Leon Board of County Commissioners Court House

301 South Monroe Street

(850) 922-4029

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